
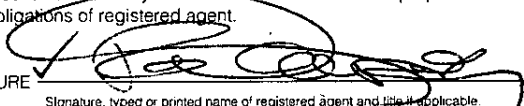
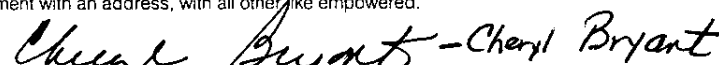


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 19, 2004 8:00 am
Secretary of State

03-19-2004 90043 025 ****61.25

| | | | |
|---|--|--|--|
| DOCUMENT # N9500000221 | |  | |
| 1. Entity Name BRITTANY GARDENS HOMEOWNERS ASSOCIATION, INC. | | | |
| Principal Place of Business 2670 ULTRA VISTA DR MAITLAND FL 32751 US | | Mailing Address 2670 ULTRA VISTA DR MAITLAND FL 32751 US | |
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | |
| KUTNER, STEVEN R 2671 ULTRA VISTA DR MAITLAND FL 32751 | | Name ROD DAWSON Street Address (P.O. Box Number is Not Acceptable) 2638 ULTRA VISTA DRIVE City MAITLAND FL Zip Code 32751 | |
| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. | | | |
| SIGNATURE  | | DATE 3/9/2003 | |
| Signature, typed or printed name of registered agent and title if applicable. | | (NOTE: Registered Agent signature required when reinstating) | |
| FILE NOW: FEE IS \$61.25 Due By May 1, 2004 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| Make Check Payable to Florida Department of State | | | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | KUTNER, STEVEN R | NAME | Secretary |
| STREET ADDRESS | 2671 ULTRA VISTA DR | STREET ADDRESS | |
| CITY-ST-ZIP | MAITLAND FL 32751 | CITY-ST-ZIP | |
| TITLE | <input checked="" type="checkbox"/> Delete | TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | TD LANDRUM, ANNE | NAME | Treasurer Cheryl Bryant |
| STREET ADDRESS | 2641 ULTRA VISTA DR. | STREET ADDRESS | 2672 Queen Mary Pl. |
| CITY-ST-ZIP | MAITLAND FL 32751 | CITY-ST-ZIP | Maitland, FL 32751 |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | VPD FLOEGEL, ALFRED J | NAME | |
| STREET ADDRESS | 2655 ULTRA VISTA DR | STREET ADDRESS | |
| CITY-ST-ZIP | MAITLAND FL 32751 | CITY-ST-ZIP | |
| TITLE | <input checked="" type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | SD BRUMFIELD, BARBARA | NAME | |
| STREET ADDRESS | 2691 ULTRA VISTA DRIVE | STREET ADDRESS | |
| CITY-ST-ZIP | MAITLAND FL 32751 | CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | ROD DAWSON / President | NAME | |
| STREET ADDRESS | 2638 ULTRA VISTA DRIVE | STREET ADDRESS | |
| CITY-ST-ZIP | MAITLAND, FL 32751 | CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | |
| SIGNATURE:  | | DATE: 3/2/04 (407) 252-7175 | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | Date Daytime Phone # | |